

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

**U.S. Department of Justice
United States Marshals Service**

PLAINTIFF
JANICE K. THURMAN

COURT CASE NUMBER
3:14-cv-01752-MO

DEFENDANT
SYNCHRONY BANK

TYPE OF PROCESS
Service of summons

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
Synchrony Bank
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 Attn: Any Officer; 170 W. Election Rd., Suite 125, Draper, UT 84020

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285	1
Kelly D. Jones, Attorney at Law 819 SE Morrison St. Suite 255 Portland, OR 97214	Number of parties to be served in this case	1
	Check for service on U.S.A.	N/A

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold _____ Fold _____

Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT	(503) 847-4329	11/18/14

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
	1	No. 65	No. 81		11/20/14

I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (*See remarks below*)

Name and title of individual served (<i>if not shown above</i>)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Address (<i>complete only different than shown above</i>)	Date	Time <input type="checkbox"/> am <input type="checkbox"/> pm

Address (<i>complete only different than shown above</i>)		Date	Time <input type="checkbox"/> am <input type="checkbox"/> pm
			Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
		8-			\$0.00

REMARKS:

11/26/14 Sent to USMS D/RT for service

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

RECEIVED
UNITED STATES MARSHAL
PORTLAND, OREGON
14 NOV 20 PM 3:37

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF JANICE K. THURMAN	COURT CASE NUMBER 3:14-CV-01752-MO
DEFENDANT SYNCHRONY BANK	TYPE OF PROCESS SUM&COM

SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
AT SYNCHRONY BANK ATTN: ANY OFFICER
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 170 W. ELECTION RD. SUITE 125 DRAPER UT 84020

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285
D.OR	Number of parties to be served in this case
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold _____ Fold _____

Signature of Attorney other Originator requesting service on behalf of:	<input type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT		

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process 1	District of Origin No. 65	District to Serve No. 081	Signature of Authorized USMS Deputy or Clerk <i>Megan Bruster</i>	Date 12/4/14
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (<i>if not shown above</i>)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Address (<i>complete only different than shown above</i>)	Date 1-5-19	Time 12:14 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy <i>M</i>	

Service Fee 65	Total Mileage Charges including endeavors 19.21	Forwarding Fee 8	Total Charges 92.21	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00 92.21
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REMARKS: *Bryce Welch - served so*

DISTRIBUTE TO:	1. CLERK OF THE COURT 2. USMS RECORD 3. NOTICE OF SERVICE 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal. 5. ACKNOWLEDGMENT OF RECEIPT	PRIOR EDITIONS MAY BE USED
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